PRACTICE BRIEF OCT 2017



Running Towards Hope: Protecting Unaccompanied and Separated Refugee Children in Northern Uganda



Children swinging at a World Vision–facilitated child friendly space in Bidibidi, Yumbe district.

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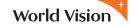
Introduction

Globally, an estimated 50 million children have migrated across borders or been forcibly displaced.¹ No matter their country of destination, these children face a variety of rights violations, from exploitation and violence to being separated from their families or caregivers and deprived of essential protections and services. These abuses constitute a grave human rights crisis. This is the case for the children of South Sudan who fled their country to Uganda in search of safety and peace.

'We were in school and they brought tear gas. We ran. We went home. Our parents were dead. We ran. We ran for three days, even in the night. We only drank water. Even if we found dirty water [along the way], we drank it.' – Viola, 9 years old, from South Sudan

More than I million South Sudanese refugees fleeing conflict, drought and hunger currently live in Uganda's West Nile Region. Over 60 per cent are children. Many of them have been

https://www.unicef.org/publications/files/Uprooted_growing_crisis_for_refugee_and_migrant_children.pdf.



UNICEF, Uprooted: The Growing Crisis for Refugee and Migrant Children (2016), 3,

separated from their families or caregivers. A reported 700 South Sudanese refugees have arrived daily in Uganda over the past year.² This is a child protection crisis.

'As we fled South Sudan, we were ambushed by armed men. They wanted to know why we were fleeing to Uganda. We were made to lie on the ground. When my father tried to explain, they shot him. We all screamed and wailed. The men grabbed our mother and took off with her to the bush.' - Peter, 16 years old, from South Sudan

World Vision is working with partners to strengthen community-based child protection systems for unaccompanied and separated children (UASC), including through case management. Vulnerable children on the move face significant risks as they arrive and settle in Uganda. Based on its experience, World Vision believes there is an urgent need to ensure that a community-based child protection system is strengthened and effective in Uganda's West Nile Region to protect children from violence and exploitation, especially children who have been separated from their families and caregivers.

This practice brief highlights some of the difficulties encountered by children on the move and by child protection agencies. Particular attention is paid to the challenges children face on arrival and in the settlements, but this brief also addresses challenges with alternative care, safety and child protection mainstreaming. Finally, specific recommendations for aid agencies, donors and local and national government seek to pave the way forward to ensure that children are protected continually.

Background

World Vision Uganda has been responding to the refugee crisis since January 2014. Activities were scaled up following the increased influx of refugees in June 2016. Initial programming included provision of high-energy biscuits to new arrivals, general food distribution, child protection and interventions in the field of water sanitation and hygiene. On 8 May 2017, the response was re-categorised to the highest category within World Vision (an equivalent of the UN Level 3 Emergency), meaning further international resources were deployed to support the work of the team on the ground.

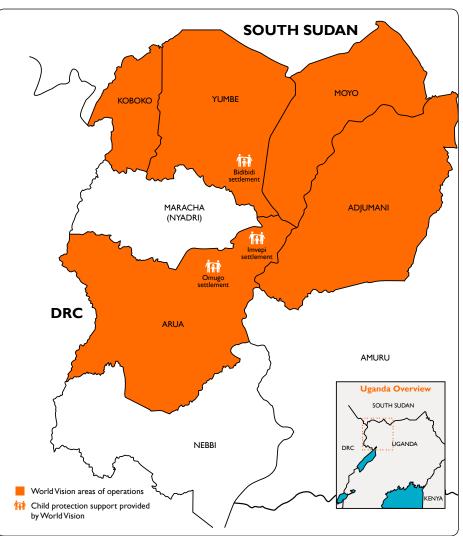
World Vision Uganda West Nile Refugee Response is currently implementing projects in child protection; livelihoods; water, sanitation and hygiene (WASH); food assistance, including cash transfers; and distribution of core relief items within five districts in the region, namely, Adjumani, Arua, Koboko, Moyo and Yumbe districts.

The organisation is the UNHCR and UNICEF case management implementing partner in Imvepi, Omugo and Bidibidi settlements, where approximately 61 per cent of 397,000 refugees are children. World Vision is an active member of the child protection coordination mechanism at the settlement level and provides child protection services in four of the five zones in Bidibidi and two of the three zones in Imvepi, with support from UNHCR and UNICEF. World Vision started its case management interventions in August 2016. 2

² United Nations High Commissioner for Refugees (UNHCR), 'South Sudan Refugees in Uganda Pass I Million Mark, UNHCR Renews Call for Help' (17 August 2017), http://www.unhcr.org/news/press/2017/8/599457a34/south-sudan-refugeesuganda-pass-1-million-mark-unhcr-renews-call-help.html.



Figure I: Map of Uganda



Ensuring that children are protected on arrival

At the border

'Once we reached the border point, we weren't scared anymore.' - Stephen, 16 years old, from South Sudan

There are six entry points³ at the border between South Sudan and Uganda. These are the only legal crossing points for people on the move who wish to reach Uganda. After refugees cross the border, the Office of the Prime Minister (OPM) conducts an initial screening. Information such as name, origin and size of the family is gathered. UASC and children at risk (CR) are identified during the process. The Red Cross is in charge of registering children and accompanying them to their first reception centre. All refugees arriving at the border point receive high-energy biscuits before being transferred to the first reception centre.

All the children identified as UASC or at risk by the Red Cross receive a coloured plastic bracelet that enables them to be easily identified by service providers. A yellow bracelet is given

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³ UNHCR, 'Access Roads to Bidibidi, Imvepi, Lobule, Palorinya and Rhino Camp Refugee Settlements' (9 May 2017), https://ugandarefugees.org/wp-content/uploads/West-Nile-Guide-Map-for-Settlements-as-of-9-May-2017.pdf.



to persons with special needs,⁴ and a white ribbon is for separated children,⁵ unaccompanied minors⁶ and CR.⁷

At the reception centre refugees receive a briefing by the OPM staff members and are manually registered. More thorough information on the refugees is gathered at this time. Everyone receives a hot meal, water and basic items. At that stage specialised health agencies screen refugees for malnutrition, malaria and other disease and refer the most serious cases that require treatment to health services.

Refugees are then sent to their new settlement by bus.

At the settlement reception centre

Upon arrival at their settlement, refugees go through a second reception centre. All children are first vaccinated, depending on their age. After vaccination, all refugees commence a process of second-level registration, beginning with the UNHCR and then OPM. Refugees receive a ration card for each household, which they use to access food and any other non-food items distributed to refugees.

Persons with special needs, including UASC and CR, are referred to the International Rescue Committee (IRC) for screening and registration. At this point IRC refers all children with protection needs – UAMs, separated children and other categories of CR – to World Vision for assessment, registration, documentation and comprehensive case management services. A 'Best Interest Assessment' (BIA) form is filled out for each child with protection needs as part of the assessment, registration and documentation process. The form enables World Vision to identify children's needs and immediate protection concerns. This guides World Vision in determining what type of foster care is suitable for the children.

During this process all UASC who express the will to find their family or relatives are referred to the Uganda Red Cross for in-country tracing and to the International Committee of the Red Cross (ICRC) for cross-border tracing. After the identification and registration process is finalised by World Vision and IRC, the UASC receive food ration cards from the World Food Programme (WFP).

For as long as UASC stay at the reception centre, they receive hot meals. As they leave, they receive their monthly food rations.

As of September 2017, the total number of cases handled through comprehensive case management procedures was 15,537 vulnerable children (see Table 1).

⁴ Persons with special needs can be girls and boys at risk, including unaccompanied and separated children, persons with serious health conditions, persons with special legal or physical protection needs, single women, women-headed households, older persons, persons with disabilities, and persons with a diverse sexual orientation or gender identity. See https://emergency.unhcr.org/entry/64324/identifying-persons-with-specific-needs-pwsn.

⁵ Children who crossed the border with relatives but without their parents or primary caregivers.

⁶ Children whose parents' or primary caregivers' whereabouts are unknown.

⁷ Among others, child parents, children associated with armed conflict, child-headed households, children with disabilities, children living with disabled parents or caregivers, children affected by sexual violence and exploitation, children affected by psychosocial distress and mental disorders, teenage mothers, children with chronic medical conditions, children in conflict with the law.



Table I. Number of cases handled through comprehensive case management procedures(September 2017)

Bidibidi	Case	Male	Female	Total
	Unaccompanied Minors	1246	1117	2363
	Separated Children	1787	1675	3462
	Children at Risk	478	461	939
	Total			6764
Imvepi	Case	Male	Female	Total
	Unaccompanied Minors	691	690	1381
	Separated Children	2961	2679	5640
	Children at Risk	513	532	1045
	Total			8066
Omugo	Case	Male	Female	Total
	Unaccompanied Minors	20	37	57
	Separated Children	236	214	450
	Children at Risk	94	106	200
	Total			707

Challenges children face on arrival

- Resource constraints make it difficult for child protection actors to provide basic material support such as soap, clothing, sanitary towels, stationery and school materials on the basis of vulnerability of children to abuse, exploitation and violence.
- Due to the high number of children needing support, agencies end up providing targeted support mainly to children who fall under the UASC and CR categories. In order to meet the Minimum Standards for Child Protection in Humanitarian Action,⁸ agencies should try to assess all children's vulnerability to abuse, violence or exploitation and provide assistance to those who are most vulnerable, regardless of whether the child is categorised as a UASC or CR.
- Agencies registering and documenting UASC and other categories of CR rely on information provided to them by the affected children. There are incidents when children who have caregiver support attempt to be registered as UASC or CR because caregivers want to benefit from extra commodities. Over time, World Vision's verification process identified a number of cases where parents or caregivers encouraged children to declare themselves as unaccompanied or separated because of associated benefits.
- Several agencies have reported cases of parents and/or children relocating themselves without informing the OPM, UNHCR or implementing agencies of their whereabouts, making it hard to ensure efficient follow-up for child protection.



A World Vision Uganda case worker at Invepi refugee reception centre takes particulars of separated/unaccompanied refugee children.

⁸ Child Protection Working Group, *Minimum Standards for Child Protection in Humanitarian Action* (2012), 212, https://www.unicef.org/iran/Minimum_standards_for_child_protection_in_humanitarian_action.pdf.



It takes partnerships

Services are provided to children by various partners on the ground.⁹ World Vision is collaborating with multiple agencies to ensure that children remain protected at all times and receive the best possible care from the moment of their arrival in Uganda. UASC and CR may be referred to these agencies at various stages during the registration process or once settled in their new location.

While the OPM manages and coordinates the whole refugee response, UNHCR is the lead agency for protection and child protection for the Western Nile South Sudan Response. It monitors the protection services provided by partners and sometimes provides technical support to World Vision for 'Best Interest Determination' (BID) or BIAs. UNHCR has provided funds for World Vision's child protection case management programme. UNICEF is the other child protection co-lead agency and funds and supports child protection and education interventions such as child friendly spaces (CFS),¹⁰ case management procedures, early childhood development and peacebuilding programming.

World Vision is also partnering with the Red Cross and NGOs. All children with tracing and reunification needs within Uganda (including intra or inter-settlement reunification) are referred to the Ugandan Red Cross, while the ICRC has the mandate for cross-border tracing and reunification, as appropriate.

World Vision coordinates with Care International to ensure that all newly arrived UASC have shelter if they have to stay overnight at the settlement reception centre. Care and IRC both provide ongoing gender-based violence counselling at the reception centre and within the settlements.

Save the Children provides child protection services in the zones where World Vision does not have a presence, as well as basic psychosocial support for UASC and CR. Finally, the Transcultural Psychosocial Organization is also providing psychosocial support in several settlements and complements World Vision's child protection interventions. It assesses psychosocial needs of children and communities and responds to these.

Challenges children face in the settlements

• Among the UASC are children associated with armed forces and groups who require an integrated support system to avoid being targeted¹¹ and stigmatised by the community, which can result in rejection or reprisals against them. Effective support for these children needs to be provided through integrated multi-sector approaches. Their needs may vary and can cover health, education, livelihoods and other vocational training, as well as advocacy and reconciliation processes. Meeting their needs for specialised mental health and psychosocial support is key to successful reintegration. This needs to be addressed together with the needs of other children within the community who were

⁹ Including, but not limited to, the Office of the Prime Minister (OPM), United Nations High Commissioner for Refugees (UNHCR), United Nations Children's Fund (UNICEF), Save the Children, Ugandan Red Cross, International Committee of the Red Cross (ICRC), International Rescue Committee (IRC), Care International, Medical Team International (MTI), Médecins Sans Frontières (MSF), Transcultural Psychosocial Organisation (TPO), Action Against Hunger (ACF), Danish Refugee Council.

¹⁰ A child friendly space is a safe and friendly space set up for children from 3 to under 18 years of age in refugee settlements and host communities. It is led by community volunteers willing to help their own children access structured play, recreation, leisure and learning activities that support children in restoring a sense of normalcy, provide opportunity to continue learning and increase their resilience.

¹¹ Minimum Standards for Child Protection in Humanitarian Action, 212.



also deeply affected by conflict. Unfortunately, access to specialised services continues to be limited, and this support is not currently available.

- Regular follow-up of all the above categories of children with case management needs requires significant increased investment by donors. Ensuring there are suitable numbers of qualified professionals, ongoing training, supervision and coaching to respond adequately to the specific needs of CR, in line with global interagency standards, is critical to mitigating violence against children in the long term.
- There is currently a significant funding gap to support adolescent mothers with breastfeeding guidance and follow-up at home. World Vision is working with health-focused agencies to overcome this, but this is currently limited to clinical support. This is further compounded by a general lack of health services, making access to health care challenging. This can force refugees to travel long distances to get the right health care and medicine.

It takes families

The government of Uganda uses a set of official standards and processes called the Alternative Care Framework¹² when responding to the needs of UASC and the plight of orphaned and vulnerable children. The Alternative Care Framework is the official continuum of care for responses to vulnerable children in Uganda, including those who arrive from South Sudan.

In an ideal world no child would be separated from his or her parents, and alternative care would not be required. When that is not possible, alternative care needs to be arranged. Evidence shows that children do best in a family-based environment. To ensure that children are safe and protected, temporary care can be provided with an extended family member or a foster family.

In order to find a suitable foster family for UASC, World Vision identifies and selects the best possible match for each child. Based on the Alternative Care Framework, potential foster parents are required to meet several criteria, including family size, language, tribe and good childcare practices. This includes police checks. Community member references are obtained to ensure there are no previous reported or recorded incidents of any form of violence, abuse, exploitation or neglect of children by the foster family. The willingness and motivation of the potential foster parent to take on a child is also assessed. Families with both a father and a mother are preferred, especially when fostering adolescent boys or girls. All foster parents are identified from among South Sudanese refugees in the settlements, and they sign a foster-care agreement as a commitment to take good care of the foster children placed under their care.

Through community mobilisation, World Vision identifies potential candidates for fostering. All the fostering families are registered and receive training in child protection and child rights, as well as in emotional and psychosocial care of children who may have had distressing experiences or who continue to experience distress. Foster families also receive material support, such as shelter, soap and a few other basic items. Children remain closely followed by World Vision's caseworkers to ensure they are safe and cared for. Children receive core relief items, including blankets, sleeping mat, food ration cards and mosquito nets, prior to fostering. The organisation also makes sure the plots of land the children receive are next to those of their foster parents.

¹² Developed by the Government of Uganda, in collaboration with civil society organisations, these official standards and processes must be followed when working with orphaned and vulnerable children. See http://www.alternative-care-uganda.org/.



'We have established a network of potential families trained on the foster care arrangement, which includes child protection. Before a child is assigned to a particular family, we make sure that [the child's] best interests, like language and tribe, are checked and considered.'

– World Vision's Child Protection Officer Evelyn Lucy Atim

Many times, during flight, UASC meet other fleeing families and build a relationship with them. When these UASC arrive at the reception centre, caseworkers inquire whether children would prefer to remain under the care of the families they came with. Whether it's a new family or a family a child travelled with, vetting is completed following the same criteria to minimise risks to children.

Some UASC have travelled with siblings and/or other child relatives. To avoid separating siblings as a result of foster care, a family in the neighbourhood, along with the Child Protection Committee (CPC) members, is mobilised to support and protect these child-headed households in the settlement. Maintaining existing family systems, even if it is a child-headed family, is vital in such contexts.

'When we met at the transit centre, they came directly to me and asked if they could set up their shelter next to ours, as we know each other from back home/' - Mary, mother of four children and looking after four UASC

World Vision continues to follow and closely monitor the UASC's situation and well-being. Caseworkers aim to visit the child at home at least twice a week, more often for high-priority cases. The frequency of the visits is less for cases categorised as medium/normal or low priority. Specific attention is paid to child-headed households that are supported by the CPC and community leaders and other UASC and CR with urgent protection concerns. Model couples¹³ and foster-care networks support unaccompanied children who are also mothers and train them in positive parenting skills.



A foster family takes care of four unaccompanied minors.

In serious cases of violations of a child's rights and the removal of a child from parents or guardians, a BID is conducted under the guidance of UNHCR. The decision to relocate a child is taken following a case conference. This is a consultative meeting of the OPM, UNHCR and the district probation officer where a joint decision is made in the best interests of the child. The BID will serve to assess the best possible alternative care options, and the affected child can be immediately re-fostered should the situation require it.

¹³ World Vision International, A Case Study for the Child Protection in Emergencies (CPiE) Integrated Programme for Refugees in Uganda 2016 (2017), 8–9, available at http://www.wvi.org/sites/default/files/HEA%20Uganda%20Case%20Study-FINAL.pdf.



Challenges of alternative care

- Foster parents of UASC need to be trained and systematically mentored in positive parenting and discipline and in providing care for children affected by traumatic experiences. Combined, World Vision's Celebrating Families project model,¹⁴ ongoing provision of information explaining roles and responsibilities of parents, basic psychological first-aid training, and sharing best parenting practices can play a significant role in ensuring that children remain protected in their new homes. More training and refresher trainings are needed, as well as material support, and unconditional and conditional grants to improve the well-being of foster families.
- Due to high caseloads in which, on average, each caseworker handles over 100 cases the ability to ensure diligent follow-up once the child is integrated in his or her new family is limited. In the best case scenario, a caseworker is expected to handle a caseload of 25 children; however, in the current emergency situation, this is not tenable. More funding is urgently required to strengthen and expand the number of and capacity of caseworkers and child protection agencies.
- Child protection actors have reported cases of parents engaging in the foster-care process in order to gain benefits from fostering a child. In addition, large families made up of several siblings are usually harder to foster, and finding foster parents for them is a challenge.

'We found life in Uganda is so good. They have schools in Uganda. They have places where we can go and play. You don't hear gunshots.' — Stephen, 16 years old, from South Sudan

It takes safe spaces

So far, World Vision has set up 29 CFS in the West Nile region of Uganda. On average, 50,000 children attend a World Vision CFS every month, both South Sudanese refugee children and children from Ugandan host communities.¹⁵

World Vision runs 21 CFS in Bidibidi, with an enrolment rate of 2,000 children a month. Two other CFS are located in Imvepi and six in Adjumani.

World Vision's child friendly spaces have integrated early childhood development (ECD) activities into their programmes to provide age-appropriate activities¹⁶ for children under 6. ECD primarily targets children who have never been to school, children who have had to drop out of school and/or children who are just starting school.

In all World Vision–run CFS, full case management is provided, as is basic psychosocial support. Animators look after children to ensure they integrate well and engage with other children and build a space where children feel safe and free to express themselves. Children are engaged and encouraged to provide feedback on how they are settling in their new home. In schools, World Vision is running peacebuilding and child protection programming; strengthening school structures such as centre management committees, parent/teacher

 ¹⁴ World Vision International, 'Celebrating Families', http://www.wvi.org/church-and-interfaith-engagement/celebrating-families
¹⁵ World Vision, West Nile Refugee Response - 90-day Report (6 September 2017), 4.

http://www.wvi.org/publication/west-nile-refugee-response-90-day-report.

¹⁶ Activities include, but are not limited to learning alphabets, basic mathematics, reading, writing, drawing, singing and other activities aiming to stimulate a child cognitive skills. These activities are conducted for pre-school children by community volunteers called caregivers at CFS while all other children are expected to be at school. These activities prepare them for formal school and help them to do well in their future classes.



associations and peace clubs; and supporting parents with child protection skills. These groups are trained in reporting, preventing and responding to cases of violence against children.

Challenges with safety

 The distance to schools has been reported by many implementing partners as one of the main contributing factors to low school attendance in some zones of the settlements. There are expectations that CFS will provide the required education for children. However, lack of funding does not allow CFS to deliver a suitable alternative to formal education.



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Refugee children playing at a World Vision child friendly space in Bidibidi.

The aim of CFS is for children to access their right to play, to be children and to recover some sense of normalcy and routine before engaging in formal education. Funding for school meals could create a 'pull factor' and increase school attendance.

 Capacities of CFS animators need to be strengthened to ensure meaningful child participation and to enable animators to identify children experiencing psychosocial distress or other child protection concerns and refer them to appropriate service providers. World Vision is training new animators in child protection, care and support, CFS management, and identification and referral of children with child protection needs. Still, this is moving slowly due to inadequate funding for capacity building.

It takes Child Protection Committees

In addition to engaging children at the CFS and following up through home visits, World Vision is mobilising and sensitising communities to understand the importance of CPCs as well as to elect and form them. The CPCs in the refugee settlements are made up of 15 members, mostly South Sudanese refugees. To date, there are 59 CPCs in Bidibidi and 15 in Imvepi, but the process to establish and operationalise CPCs is ongoing, with the aim to have one CPC per village. World Vision provides training to CPCs on child rights and protection, and on the roles and responsibilities of the CPC, and it asks each member to sign a Child Protection Code of Conduct. In addition, World Vision organises regular reflection meetings as well as refresher



Early childhood development activities taking place at a World Vision child friendly space in Adjumani district, West Nile region.

trainings to enhance the CPC's capacity to protect children efficiently.

These committees are responsible for identifying vulnerable children, CR or children with special needs and to document, refer and report cases to the relevant body or agencies (medical, psychosocial, etc.). CPCs raise awareness of child protection, prevention and response among the communities, and they support children to access services. CPCs are better placed to follow up some cases of UASC and CR within their own resettlement sites or zones. Finally, they are the first advocate for improved service delivery.



Challenges with child protection systems

- Currently, World Vision is supporting the establishment or strengthening of informal child protection systems,¹⁷ such as the CPCs, but the link with the formal child protection systems within the local-government system is still weak. Formal structures are involved in the response but only to a limited extend.
- CPC members need more training on child rights and protection as well as case management. Refresher training and follow-up will be essential to ensure communitybased child protection in the long run. As the members are participating on a voluntary basis, it can be challenging to ensure meeting attendance and maintenance of case records.

It takes mainstreaming child protection

Mainstreaming is achieved by taking into consideration child protection concerns in all aspects of humanitarian action, by identifying potential child protection risks across all sectors and by working with these sectors to adapt programme design to mitigate these risks. While some mainstreaming is already taking place, much more needs to be done.

Beneficiaries have reported, for instance, that accessing the latrines at night was not safe. Agencies have therefore provided lights or set up latrines closer to the residences. This issue was gradually addressed, but the needs remain massive and access to water is an issue.

During food distribution, caseworkers and child protection staff facilitate easy access for vulnerable children to the food being distributed. Specific measures have been taken to ensure that UASC do not miss out on education in order to access food.

In schools, World Vision has provided trainings on child rights and protection to teachers. Further coaching on the specific psychosocial needs of vulnerable children and best practice means of supporting them needs to be provided. This is further supported by the establishment of child protection structures in schools.

Challenges to mainstreaming child protection

'I want the leaders of South Sudan to unite for peace. We the children have suffered a lot. I want those who have been left behind in South Sudan - I want them to be safe and protected.'

– Annet, 17 years old, from South Sudan

• Mainstreaming child protection across all sectors of interventions needs further strengthening. More needs to be done to incorporate the principles of humanitarian protection into aid design and delivery, ensuring that the risks of discrimination, abuse, violence against children, neglect and exploitation are reduced. This includes the need to establish regular information sharing about emerging concerns between child

¹⁷ These include, but are not limited to, CPCs, faith leaders, community leaders, community watch groups, foster-care networks, Peace Clubs and other child, adolescent and community groups.



protection staff and other sectors, to monitor child protection risks, and to develop a child protection mainstreaming action plan for the response.

 'Special treatment' for UASC during food distributions has led some community members and parents to send children to pick up their food ration in order to get their food faster. In some cases this has prevented children from attending school. This problem is being addressed through awareness creation and vigilance of CPCs,



A young child looks for his mother inside the biometric registration tent at Imvepi reception centre.

caseworkers and Food Management Committees at the food distribution sites to prevent schoolchildren from collecting food on behalf of their household. However, it has been acknowledged that more needs to be done to address this challenge.

Recommendations

It is important that all actors – aid agencies, local and national government and donors – work to strengthen community-based child protection systems and ensure stronger linkages between informal child protection systems and the formal systems led by the Government of Uganda at the local and national levels. This should include investment and support for both formal and informal systems by donors and international partners. Ensuring sustainable formal and informal child protection systems will be key to ending violence against children in the long term. The following specific suggestions are for each actor.

Aid agencies

- Strengthen organisational capacity in child protection in emergencies and mainstream child protection in other response sectors to enhance protection of children from abuse, neglect, exploitation and all other forms of violence.
- Develop standard operating procedures on how to distribute food to extremely vulnerable groups, including UASC, in an integrated way.
- Train frontline staff in child protection, available referral systems and basic psychosocial support in order to identify and provide immediate assistance to children showing signs of distress.
- Establish and run effective case management systems for UASC and CR. Access to improved database systems, such as the Child Protection Information Management System (CPIMS), needs to be available to all child protection actors.
- Scale up and further integrate mental health and psychosocial support across the entire response.

Donors

- Ensure adequate resourcing and staffing for efficient and quality case management and follow-up of all UASC in foster families to ensure closer alignment with international standards.
- Secure access to school for all children. More schools need to be built closer to the existing settlements to absorb the influx of children. In the meantime, alternative



quality education services need to be supported, such as Education in Emergency, Early Childhood Development, Accelerated Learning Program (for adolescents) or Literacy Boost,¹⁸ among others alternatives.

 Support the Government of Uganda in implementing the Comprehensive Refugee Response Framework, paying particular attention to strengthening provisions for the protection and rights of refugee children at the national and international levels. The international community must establish a strong framework, through the Global Compact on Refugees, to protect children on the move.

Local and national government

- Enhance existing coordination mechanisms, such as the referral pathways and standard operating procedures for child protection, case management, and inter-agency coordination at the settlement and national levels.
- Ensure that all children are treated first and foremost as children, no matter their country of origin, category or status. All formal and informal structures and services should be made available to them. Prioritise, in line with the Comprehensive Refugee Response Framework pillars, the empowerment of children, particularly in regard to building their resilience to shock and displacement.



Blessing, 12, lives in the world's largest refugee settlement – Bidibidi – where more than 284,000 South Sudanese refugees reside. She's a member of the World Vision peace club.

¹⁸ Save the Children, *Literacy Boost*, http://www.wvi.org/education-and-life-skills/literacy-boost.



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Majid, 10, draws a picture in a World Vision child protection site at Invepi refugee reception centre.